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| Application Number | 10/632,231 |
|------------------------|---|
| Filing Date | July 31, 2003 |
| First Named Inventor | Donna Murray WALKER |
| Title | Methods and Apparatus for Stress Relief |
| Art Unit | 1742 |
| Examiner Name | Sikyin Ip |
| Attorney Docket Number | 1001-001 |

| I hereby revoke all previous powers of attorney given in the above-identified application. | | | | | | | |
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| Applicant/Inventor. OR Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | |
| Signature | Danna M. Walker | | | Date | 2-11-10 | | |
| Name Title and Company | Donna M. Walker ompany Resident Hitkansut, LLC | | | Telephone | 248-613-6089 | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | |
| *Total of | forms are submitted. | | | | | | |

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